

INDIANA ENTERPRISE ZONE PROGRAM

PETITION FOR BUSINESS REINSTATEMENT

PLEASE REFER TO IC 4-4-6.1-2.5(e)

Please complete each section entirely and submit to:

Indiana State Enterprise Zone Board
1 North Capitol, Suite 600
Indianapolis, IN 46204

Your petition will be heard at the next scheduled Indiana State Enterprise Zone Board meeting. A representative of your business may wish to be present to state the facts and reasons for not complying with the filing deadlines for the EZB-R and why your business should be reinstated into the Indiana Enterprise Zone Program.

The staff of the State Enterprise Zone Board will contact you with information regarding the time and place of the meeting.

_____, _____ *of* _____
(Name of person submitting petition) (Title) (Name of Company)
***being first duly sworn, upon his oath alleges and makes the following
petition for the reinstatement of _____
(Name of Company)
in the enterprise zone program pursuant to IC 4-4-6.1-2.5:***

GENERAL INFORMATION:

Name of Business: _____

Business Type: _____ "C" _____ "S" _____ "SP" _____ Other (specify)

Address: _____

City, State: _____ Zip: _____

Phone: _____

Zone Location Address: _____

Zone City: _____ Zip: _____

Contact Person: _____ Title: _____

Number of Years Participating in Program: _____

EMPLOYEE INFORMATION

Number of Employees: _____

Number of Employees who are Zone Residents: _____

REINVESTMENT

Briefly describe how your business has reinvested the tax savings received either in your property, your employees, or in increased inventory.

SAVINGS INFORMATION

	Disqualified Year	Previous Year to Disqualified Year
Total Inventory Tax Savings:	_____	_____
Total Gross Income Tax Exemption:	_____	_____
Total Employment Expense Credit:	_____	_____
Total Loan Interest Credit:	_____	_____
Total Savings:	_____	_____
Property Taxes:	_____	_____

ZONE/COMMUNITY INVOLVEMENT

Please list and describe any Urban Enterprise Association programs or community programs in which the business participates.

REASONS FOR LATE FILING

Please list and describe the reasons for the business filing the EZB-R late or not at all.

REASONS FOR REINSTATEMENT

Please list and describe the reasons for reinstating the business into the Indiana Enterprise Zone Program.

The foregoing constitutes the complete petition of

_____. ***I certify, under the penalties of***
(Name of Company)
perjury, that the representations in the foregoing petition
are true and accurate.

(Signed Name)

(Printed Name)

(Title)

(Date)

LOCAL SUPPORT

This section is to be completed by a representative from the local Urban Enterprise Association in which the petitioning business is located. Comment on the business' participation in the community, your discussion should include, but is not limited to the following: history of the business in the zone, more detail on the business' contributions to the enterprise zone, and specifics on the workforce of the business.

[illegible]

I, _____ ***have reviewed the petition for reinstatement***
(Name of UEA Representative)

for _____ **on** _____.

(Name of Company) (Date)